

TRICARE Northwest

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New Commander Welcomed Aboard at NHB

By Judith Robertson

With the reading of the succinct paragraph that comprises Navy orders, Capt. Christine S. Hunter, MC, USN, assumed command of Naval Hospital Bremerton from Capt. Gregg Parker, Oct. 20.

Guest speaker Vice Admiral Richard A. Nelson, Surgeon General of the Navy, told the over 400 assembled family members, friends, associates, and staff, "Today I feel I have lost a little of both arms. With Capt. Parker stepping down, Navy Medicine is losing one of our most capable and proven commanding officers. He has led Naval Hospital

Bremerton to a point where many of your programs are considered the standard in Navy medicine and some of them in military medicine."

Nelson called Parker a "tenacious and dedicated clinical professional and an outstanding leader.

Hunter comes to the command from seven years as Executive Assistant in the Office of the Surgeon General.

"I've had to let her go from being my executive assistant where she truly served as my right

Deal Succeeds Carter as New Madigan Commander

Sharon Ayala, MAMC PAO

After serving as the Interim Commander of Madigan Army Medical Center for a little more than three months, COL Tony Carter relinquished command to COL Virgil T. Deal during a Change of Command ceremony conducted Oct. 27, 10 a.m. at the Fort Lewis Watkins Field. BG Kenneth Farmer, commander, Western Regional Medical Command and Lead Agent, was the host commander and reviewing officer.

Deal arrived at Fort Lewis from San Antonio, Texas, where he served as the director, Combat and Doctrine Development at the United States Army Medical Command.

He said that he and his wife, Ida, are looking forward to their assignment at Fort Lewis. He also praised Madigan as a leader in the managed care arena.

"Since the Department of Defense's entry into the business of managed care, Madigan continues to hold a place of honor and respect," Deal said. "Madigan is not only an Army hospital that has the greatest experience in managed care, but also excels in its customer focus and its commitment to taking care of people in a classy way."

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JCAHO Survey Team Will Visit NHB in December

Three different inspection teams will all conduct surveys at the Naval Hospital during the period of Dec. 4-8, 2000. The Joint Commission on Accreditation of Healthcare Organizations, the Medical Inspector General, and the Navy Occupational Health Survey teams will all be present simultaneously to conduct separate surveys.

The JCAHO team will conduct their survey Dec. 4 to 7 at the Alcohol Treatment Dept., and the Branch Medical Clinic

at Puget Sound Naval Shipyard, and the Branch Medical Clinics at Submarine Base Bangor and Naval Station Everett, as well as the main hospital. The JCAHO survey, which is conducted every three years,

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New Commander Welcomed Aboard at NHB Cont'd

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arm. I will miss her -- but your gain," Nelson said. "Your new CO comes to you with impressive experience and skills. Foremost, Christine Hunter is an outstanding physician. She is triple boarded (board certified in Internal Medicine, Hematology and Oncology), and has kept an active clinical schedule through all her leadership and administrative roles. When Gregg convinced me he was going to retire, I knew we would need a strong, capable leader to follow on here in Bremerton, someone to capitalize on the gains that we knew you had made here and push them forward to the Navy."

Although Parker used casual ad-libbing throughout his farewell remarks they nonetheless projected the intensity of his personal convictions that have been the hallmark of his leadership for the 1,200 personnel that make up the Naval Hospital and it's five Branch Medical Clinics.

The Doctor began by saying that "twenty years ago my wife

dubbed me as a warrior with the heart of a philosopher -- as well as a peacekeeper."

Parker showed those traits as he molded the mission and vision that would guide his leadership. "We should be focused on one thing -- healthcare," Parker said when he arrived in Aug. 97, and nothing has deterred him from pursuing that basic premise.

Parker sparked spontaneous applause when he said. "We wanted to be known as the place where you could receive timely, respectful, compassionate care -- and I think we've done that."

During the ceremony, active duty personnel, government civilians, contract representatives, reservists and volunteers, who together comprise the hospital's "Total Force," accepted the Meritorious Unit Commendation. The recognition, which represents the first award for the hospital since WWII, was, in part, for setting "the high water mark for synergistic blending of the readiness and benefit missions... the obvious desire to excel in

meeting the needs of the Fleet, the Fleet Marine Force and their families."

Hunter acknowledged the hospital's successes and its integrated Total Force. "As a team you've accomplished a great deal. From the Fleet Hospital to the Family Practice Residency and from the Emergency Room to the delivery room, you've set new standards for training and clinical excellence. Together we have a lot to look forward to," Hunter said. "Our future is filled with opportunity. I am exceptionally privileged to stand here today and face the future with you."

Hunter, who is joined in the Pacific Northwest by her husband Robert Hunter and daughter Jennifer, is the first female physician to head Naval Hospital, Bremerton.



Instruction Will Assist Patients to Use Healthwise Handbook

Are you interested in learning more about the Healthwise Handbook? If so, Foundation Health Preventive Care Services and Madigan Army Medical Center will be offering phonebased classes on how to use your self-care manual. This

new program allows you to participate in discussions with a registered nurse and other participants in the comfort of your home, while learning how to use the healthwise handbook and other self-care tools.

The classes will be offered

Nov. 8 and Dec. 11 from 6 p.m. to 7 p.m. If you are interested in learning more about this program or would like to sign up, please call Pam Birgenheier 968-1286.

Deal Succeeds Carter as New Madigan Commander Cont'd

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Prior to Deal's arrival, the Madigan commander wore several hats, which included commanding the Western Regional Medical Command and serving as the Region 11 Lead Agent. But now that Farmer has assumed the latter two roles, Deal will be able to focus primarily on Madigan issues.

"This new DoD initiative now grants command and control of military hospitals in the region to the Lead Agent," whereas before, "the Madigan commander assumed that responsibility," Farmer explained. "As we move into a highly visible pilot project that expands the role and authority of the TRICARE Region Lead

Agent over the joint region services facilities in the Northwest, there became a desire and need to separate these hats."

Which meant, according to Farmer, that a stellar senior colonel was needed to command Madigan. Farmer assured staff members that Madigan isn't losing a general but is gaining a colonel and will now benefit from the full-time commander that it needs and deserves.

During the ceremony, Farmer also commended Carter for a job well done.

"COL Carter came here this past summer to become the deputy commander for clinical services. But shortly after arriving, he had to step up as the Interim Madigan and Regional Commander."

Interim command is never easy

and Farmer stated that Carter took over at a time and place when major decisions were being made, "...and did it with plume."

Although commander for only a few months, Carter praised Madigan and its staff, saying, "there's only one reason why Madigan and other health care facilities in the Region 11 are repeatedly asked to head up new health care initiatives. Because we are strong enough to absorb the problems of innovations while leveraging its strengths and continuing to provide outstanding service."

Carter ended by saying in his twenty-seven year medical career, Madigan is by far the best place he's ever worked. "I'm fortunate that I can change command yet stay on as deputy commander for clinical services."

JCAHO Survey Team Will Visit NHB in December Cont'd

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will evaluate the organization's compliance with nationally established standards and the conditions under which accreditation should be awarded. Joint Commission standards deal with quality of care issues and the safety of the environment in which care is provided.

The MedIG team will focus primarily on concerns regarding Navy issues and the NAVOSH group will hear issues related to occupational health and safety. Anyone believing he or she has pertinent concerns to bring forward to any of the teams may call the Hotline at (360) 475-4555 and leave a message requesting an interview for the time period when the team is on site. A caller should clearly leave his or her name, phone number and some indication of the subject so that an interview may be scheduled with the correct team.

Clinical Research Short Course Offered

The Clinical Investigation Department will be conducting a Clinical Research Short Course Nov. 8th and 9th at the Fort Lewis Golf Course.

The goal of the course is to provide a working knowledge of procedures and practices pertaining to clinical research at Madigan. The course is open to individuals doing or planning to do clinical research at Madigan. To register, please call 968-1160.

Defense Authorization Bill Expands Medicare-Eligible Retiree Benefits

Medicare-eligible uniformed services retirees, their spouses and survivors who are age 65 and over will be entitled to expanded health care benefits under legislation signed by President Clinton on Oct. 30. According to Pentagon data, this population represents approximately 1.4 million people.

The new benefits include coverage under TRICARE, the military's health care program, and pharmacy coverage. April 1, 2001, is the start date for eligible beneficiaries to receive pharmacy benefit to include access to military treatment facility pharmacies, the National Mail Order Pharmacy program and retail pharmacies. Beneficiaries aged 65 or older or who will be 65 before April 1, 2001 will be eligible to use the pharmacy benefit without being enrolled in Medicare Part B. Those who turn 65 on or after April 1, 2001 will need to be enrolled in Medicare Part B in order to use the pharmacy benefit.

Effective October 1, 2001, under the new law, eligible beneficiaries who continue to receive medical care from their current Medicare providers will have TRICARE as their second payer. TRICARE will pay their out-of-pocket costs for services covered under Medicare. In addition, they will have access to TRICARE benefits that may not be covered under Medicare. To participate in the health program, beneficiaries must be eligible for Medicare Part A and

enrolled in Medicare Part B.

"We are pleased to have the legislative authority to provide our Medicare-eligible beneficiaries health care benefits similar to those other military beneficiaries receive. We have begun to work out the many details for each new authority and will continue to update our web site as we progress at www.tricare.osd. mil//ndaa/fast_facts.htm. This new authority gives us the ability to keep the faith with America's military," said Acting Assistant Secretary of Defense for Health Affairs J. Jarrett Clinton.

According to TRICARE
Management Activity officials,
who will administer the new
benefit, eligible seniors should
NOT immediately cancel their
current "Medigap" insurance
coverage. The Department of
Defense is working with the
Health Care Financing Administration to provide the most accurate information on the appropriateness of continued enrollment in "Medigap" insurance
policies.

Eligible beneficiaries should do two things now to ensure their future eligibility for TRI-CARE benefits. First, they should update their Defense Enrollment Eligibility Reporting System (DEERS) record with their correct address and any changes in family status such as marriage, divorce, birth or adoption. Home addresses are important because the address on file with DEERS is used to send out information on health bene-

fits. In addition, health benefits could be denied if DEERS is not updated to reflect a new spouse or child. Retirees may update DEERS by:

- Going to the nearest military personnel office;
- E-mailing changes to: <u>addrinfo@osd.pentagon.mil</u>;
- Mailing changes to the DEERS Support Office, ATTN: COA, 400 Gigling Road, Seaside, CA 93955-6771;
- Calling the toll-free numbers for the DEERS Support Office, 1-800-334-4162 (California only), 1-800-527-5602 (Alaska and Hawaii), and 1-800-538-9552 for the rest of the United States.

Eligible beneficiaries should also enroll in Medicare Part B if they haven't already. If they are not sure if they are enrolled, they can check the back of their Social Security card for this information. To enroll, beneficiaries must submit an application for Medicare Part B directly to the Social Security Administration. The General Enrollment Period for enrollment in Medicare Part B is held January 1 through March 31 of each year, and Part B coverage starts on July 1 of that year. For details on enrollment in Part B, beneficiaries may call the SSA tollfree number, 800-772-1213, or visit any Social Security office. They also can find information on the Medicare Web site. www.medicare.gov.